

Dr. Arias remarks – Breast Cancer (11/14/12)

Good afternoon and thank you for joining us today to discuss a very serious health problem for all women --- breast cancer --- with a particular focus on a troubling disparity in the U. S. – Breast cancer in black women.

Today, CDC released its monthly Vital Signs report, a special Morbidity and Mortality Weekly Report that highlights critical public health issues facing our nation. This month's Vital Signs report is on breast cancer death rates among black women.

Black women are 40 percent more likely to die from breast cancer compared to white women. Breast cancer death rates among women in the U.S. generally have declined in the past two decades. However, black women are not experiencing a drop in death rates at the same pace. Black women are diagnosed with breast cancer at lower rates, yet, they have higher death rates compared to any other racial or ethnic group. During 2005 through 2009, for every 100 breast cancers diagnosed - black women had nine more deaths compared to 100 white women who were diagnosed during the same time period.

There are a number of factors that we think contribute to this health disparity, but there are two that are of particular importance.

1. Unacceptable gaps in the provision of timely, adequate, and appropriate healthcare, and
2. The difficulty women have in navigating our complex health care system.

As a public health leader - and as a woman - I find these disparities in breast cancer deaths unacceptable, but they are also avoidable. Therefore, today's report serves as a national call to action to make breast cancer death rates among black women a national priority among all entities:

- This includes the Federal government, state and local health departments, health care systems, and individual health care providers.

Addressing this problem can be complex, but we are closer to a solution with the important passage of the Affordable Care Act.

- The Affordable Care Act will dramatically increase access to health care, especially for health screenings, such as mammograms.
- Research has shown that the lack of access to health care has been a major reason why women do not get cancer screening tests.

The Affordable Care Act also has multiple provisions that improve the quality of care including:

- Significant investments in the implementation and use of electronic health records and other health information technologies, which ensure that women get the follow up care they need after a mammogram.
- Investments in preventive interventions from the Prevention and Public Health Funds.
- Health Care Innovation Challenge grants that will test promising new payment and care delivery models to increase accessibility, availability, and quality of healthcare.

Today's Vital Signs report highlights critical issues in the quality of care for black women that have a clear impact on their health.

To talk more about the "Vital Signs" report and what we must do to address these disparities, I am pleased to introduce Doctor Marcus Plescia (Plesha) Director of the Division of Cancer Prevention and Control at CDC.

Thank you, Dr. Arias. And thanks everyone, again, for joining us today.

Breast cancer is the second leading cause of cancer deaths among women in the U.S, and the outcomes for black women with breast cancer are poor. This "fatal" disparity must end. Today's report includes cancer registry data from 2005 through 2009 from CDC and the National Cancer Institute's cancer registry programs, along with death certificates from CDC's National Vital Statistics System.

I would like to share a few major findings from the report that show black women do not receive the same quality of breast cancer screening, timely follow up for abnormal tests, and quality treatment:

- Although black women report getting mammograms at the same rates as white women, 45% of black women are diagnosed with more advanced breast cancer (breast cancer that has spread beyond the breast) compared with 35% of white women.
- Timeliness of care is a challenge as well. For example studies have shown that:
 - Twenty percent of black women experience follow-up times of more than 60 days after an abnormal mammogram compared with 12% of white women.

- Only 69% of black women start treatment within 30 days compared with 83% of white women, and
- Fewer black women receive surgery, radiation, and hormone treatments they need compared to white women.

While further research is needed to understand the biology of breast cancer in black women to design additional strategies, a recent study showed that death rates could be reduced by close to 20 percent if the same treatment was provided to both groups of women.

The solutions to address these disparities are within reach, but all parties have to step up to the plate and make equal treatment a priority. There is a shared responsibility for all of us.

We know what works to make an impact in closing the gap in breast cancer death rates.

- At the CDC, we've made breast cancer disparities a priority and have more than a 20 year history of providing high quality services to uninsured women.
- The National Breast and Cervical Cancer Early Detection Program administered by CDC holds health care providers accountable for reporting performance data and achieving results.
- We have also expanded the use of patient navigators and case managers serving in underserved communities, who have a proven track record of assisting women in getting the care they need promptly.

To further address this issue from all approaches, women too, have an important role to play in their health care.

- They can learn about how to better navigate and understand our complex health care system.
- They can learn more about breast cancer and the severity of the disease.
- They can obtain information from reputable sources like CDC and the National Cancer Institute.
- They can talk with their doctor about their risk for breast cancer, when to get a mammogram, and to understand the urgency of following their recommendations.

In closing, I would like to emphasize that the full benefit of breast cancer screening can only be achieved when we ensure that EVERY woman receives timely follow up, and high-quality treatment. Thank you. Now, I will turn it over to Dr. Arias.

Thank you, Doctor Plescia for your presentation, and for shining a spotlight on this important topic.

I would like to close our remarks with three key points from today's report:

- Despite a decline in breast cancer deaths, black women still have the highest death rates from breast cancer among all racial and ethnic groups.
- The Federal government, state and local health agencies, the health care system, and health care providers must ensure that black women, like all women, have access to timely follow up after abnormal breast cancer exams, and receive high quality treatment if diagnosed with breast cancer,
- And most importantly, many black women's lives could be saved each year if they receive screening and quality treatment.

We have achieved significant success in the fight against breast cancer in this country. But, everyone must continue to work together to end this terrible disease for all women and especially for those most in need so that more mothers, daughters, wives, and sisters have the best chance of surviving breast cancer.

Thank you all for joining us. We are happy to take questions at this time.